## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |                |  |                |   |                     | SMALL ENTITY TYPE   |                        | OTHER THAN OR SMALL ENTITY |   |                        |
|---|----------------|--|----------------|---|---------------------|---------------------|------------------------|----------------------------|---|------------------------|
| FOR   |                | NUMBE                                      | NUMBER FILED   |   | NUMBER EXTRA        |                     | FEE                    | )<br>  [                   | RATE                                    | FEE                    |
| BASIC FEE   |                | 4  |                |   |                     |                     | 345.00                 | OR                         |   | 690.00                 |
| TOTAL CLAIMS  |                | 24   | 29 minus 20= * |   |                     | X\$ 9=              | İ                      | OR                         | X\$18=                                  | 12                     |
| ND  | EPENDENT CL    | aims 3                                     | 3 minus 3 = *  |   | •                   |                     | ·                      | OR                         | X78=                                    | /                      |
| MU  | LTIPLE DEPENI  | +130=                                      |                | OR  | +260=               | /                   |                        |                            |   |                        |
| * If  | the difference | TOTAL                                      |                | OR  | TOTAL               | 1/2                 |                        |                            |   |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)  |                |  |                |   |                     |                     |                        |                            | OTHER THAN<br>OR SMALL ENTITY           |                        |
|   |                | CLAIMS                                     | - 57 f         | HIGHEST                                     | (Column o)          |                     | ADDI-                  | 1                          |   | ADDI-                  |
| AMENDMENT A   |                | REMAINING<br>AFTER<br>AMENDMENT            |                | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA    | RATE                | TIONAL<br>FEE          |                            | RATE                                    | TIONAL<br>FEE          |
|   | Total          | *  | Minus          | **  | =                   | X\$ 9=              |                        | OR                         | _X\$18=                                 |                        |
| AME   | Independent    | *<br>NTATION OF MI                         | Minus          | ENDENT CLAIM                                | =                   | X39=                |                        | OR                         | X78=                                    |                        |
|   |                |  |                |   |                     | +130=               |                        | OR                         | +260=                                   |                        |
|   |                |  |                | •   |                     | TOTAL<br>ADDIT, FEE |                        | OR                         | TOTAL<br>ADDIT. FEE                     |                        |
|   |                | (Column 1)                                 |                | (Column 2)                                  | (Column 3)          | · ADDITITEE         |                        | •                          | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT B   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  | 42.1           | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA    | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|   | Total          | *  | Minus          | **  | =                   | X\$ 9=              | 1                      | OR                         | X\$18=                                  | 1 22                   |
| ME  | Independent    | *  | Minus          | ***   | =                   | X39=                |                        | OR                         | X78=                                    |                        |
| _   | FIRST PRESE    | NTATION OF M                               | ULTIPLE DEP    | ENDENT CLAIM                                |                     |                     |                        | On                         |   |                        |
|   | · .            |  |                |   |                     |                     | ·                      | OR                         | +260=                                   |                        |
|   |                | TOTAL<br>ADDIT. FEE                        |                | OR  | TOTAL<br>ADDIT. FEE |                     |                        |                            |   |                        |
|   |                | (Column 1)                                 |                | (Column 2)                                  | (Column 3)          |                     | •                      |                            |   |                        |
| AMENDMENT C   |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN!T |                | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA    | RATE                | ADDI-<br>TIONAL<br>FEE |                            | RATE                                    | ADDI-<br>TIONAL<br>FEE |
| NON   | Total          | *  | Minus          | **  | =                   | X\$ 9=              |                        | OR                         | X\$18=                                  |                        |
| ME  | Independent    | *  | Minus          | ***   | =                   | X39=                |                        | OR                         | X78=                                    |                        |
| Ľ   | FIRST PRESE    | NTATION OF M                               | ULTIPLE DEP    | ENDENT CLAIM                                |                     |                     |                        | UN                         |   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                |  |                |   |                     |                     |                        |                            |   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                |  |                |   |                     |                     |                        |                            |   |                        |